

How Swedish authorities worked to export “herd immunity” to other countries

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The following is a submission to the Global Workers’ Inquest into the COVID-19 Pandemic from anti-COVID activists Keith Begg and Virpi Flyg on the efforts of the Swedish government to export its “herd immunity” strategy of mass infection to countries throughout the world. Begg is a communications specialist from Ireland who holds both Irish and Swedish citizenship, and the founder of Media Watchdogs of Sweden. Flyg is a writer, translator, and social media influencer from Finland.

Sweden has become synonymous with two words throughout the pandemic: herd immunity. Although the government and the Swedish public health authority *Folkhälsomyndigheten* (FHM) have vehemently denied that this was ever their goal, strong evidence contradicts their assertions. A litany of emails since early 2020 reveal that Anders Tegnell, Sweden’s state epidemiologist until March 2022, avidly pursued a herd immunity strategy.

Emails that were obtained through Freedom of Information laws (*offentlighetsprincipen*) between national and regional government agencies, including the Swedish Public Health Authority, have provided irrefutable evidence that the goal of Sweden’s pandemic response was through achieving herd immunity.

While these allegations have been well documented throughout international media, one of the least covered angles relates to Sweden’s attempts to influence policy makers in other countries to either change or adapt their pandemic responses. The Swedish authorities have also invested significant efforts to export their pseudo-science around the merits of herd immunity and keeping schools open based on non-peer reviewed reports.

In an interview with UnHerd, Johan Giesecke, a former Swedish state epidemiologist and senior advisor to the World Health Organization who was contracted to work with the FHM during 2020, stated when the herd immunity strategy was in full swing in Sweden, “The people who are frail and old will die first. And when that group of people begins to sort of thin out, you will get less deaths as well.”

Both Tegnell and Giesecke have gone out to the four corners of the world promoting the Swedish pandemic response with no scientific evidence to justify their claims. Tegnell in particular has become the face of the herd immunity strategy around the world. In April 2020, he warned the European Centre for Disease Prevention and Control (ECDC) against recommending masks, as it would imply that the virus was airborne.

In an email to an ECDC representative, Tegnell wrote, “We are quite worried about the statement ECDC have been preparing about face masks. See the file for some initial thoughts to possibly take into account before a final version.”

On their tour of the world, Swedish experts have had varying degrees of success in influencing other countries to change their strategies, particularly in the Global South, but they initially failed in countries that first adopted the precautionary principle.

As of May 21, 2022, Sweden has had 1,851 deaths per million of its

population, many times higher than its Nordic neighbors. However, Sweden does not include deaths from those that die 30 days after testing positive. In spring and early summer 2020, Sweden had one of the lowest testing rates in the OECD and only those that made it to hospital were tested.

At the same time, thousands of elderly people died in their beds in care homes, denied oxygen, and often involuntarily euthanized with a shot of morphine, as the vast majority of care homes were devoid of life-saving oxygen supplies. Sweden also has the fourth lowest population density in Europe and the highest number of single-living households in the world.

As the world was waking up to hundreds of thousands of deaths in March-April 2020, one of the incorrect claims by Swedish experts was that COVID-19 was a very mild disease and that the pandemic approach by Sweden was more scientific. But was it?

One of the many courageous and talented scientists who dared to challenge Tegnell and Giesecke around their scientific justifications for a herd immunity strategy was professor and virus researcher Cecilia Söderberg-Nauclér from the prestigious Karolinska Institute. Söderberg-Nauclér called for the resignation of Tegnell. When she challenged him on a phone call to provide models, data, and scientific evidence for his chosen pandemic response path, he hung up the phone on her.

Söderberg-Nauclér and other meritorious scientists strongly believed that Tegnell and the FHM had been wrong about a number of key matters. Söderberg-Nauclér debunked their assessment that the infection would not be so widespread outside of China, that the virus does not spread at an early stage and that the number of cases in Sweden would decrease after the country’s annual sports holiday, when the incubation period for those infected abroad was over.

The simple fact was that Tegnell, Giesecke, and the FHM could not provide a shred of scientific evidence to justify the path they were taking, which ignored and rejected the precautionary principle.

“Do they have some golden data that is not available to the scientific community? I can not believe that they can be the best in the world at this, when the whole world thinks otherwise,” stated Söderberg-Nauclér.

Finland

In March 2020, the Helsinki Times reported that key memos revealed how Sweden had requested that its neighbor Finland take a more lenient approach to COVID-19 measures.

According to Helsingin Sanomat, in a memo which was written by journalist and non-fiction writer Matti Mörntinen, it was noted that Swedish officials had appealed to Finland to keep schools open in March. It was hoped that Finland’s decision-makers would adopt a pandemic strategy in line with its western neighbor. However, from early on in the pandemic, the Finns took a radically different path, adopting the precautionary principle and shutting down society to stem the spread of the virus.

Most damning of all is an email sent by Anders Tegnell to his Finnish counterpart Mika Salminen, which sought to keep schools open so that

herd immunity could be achieved faster. The *Guardian* and other international media outlets later published the contents of the email exchange between Tegnell and Salminen.

“One point would be to keep schools open to reach herd immunity faster,” Tegnell commented. Salminen replied that the Finnish health agency had considered this but rejected it, because “over time, the children are still going to spread the infection” to other age groups.

Up until recently, Finland’s pandemic strategy had been exemplary as it continued down the path of a precautionary principle approach. Refusing to follow the Swedish example of herd immunity and its laissez-faire connotations resulted in a much lower mortality rate in Finland and indeed throughout the Nordic region outside Sweden. Compared to Sweden, Finland has suffered 793 deaths per million of population, while throughout 2020 and early 2021 it hovered around 150 deaths per million.

In May 2020, the Financial Times Tracker observed that Sweden’s seven day rolling average for new deaths had overtaken some of the hardest hit countries, Belgium, Italy, and the UK. Sweden’s Nordic neighbors closed their borders to Sweden and relationships began to take a turn for the worse.

Reuters reported in March 2021 that Sweden’s handling of the pandemic had soured its Nordic neighbors’ view of the country. A survey conducted by the Swedish Institute, a public agency that promotes the country on the world stage, found that almost 40 percent of respondents in Denmark, Finland, Iceland, and Norway had become less positive about Sweden over the past year, citing its pandemic management as the main cause for concern.

Norway

Like Finland, Norway also locked down in mid-March 2020. Johan Giesecke became a common sight on Norwegian media, telling Norwegians that Sweden’s herd immunity approach was the best strategy. According to Giesecke, Sweden’s strategy was the only one that was based on science, while Norway’s lock-down was a political choice that would only postpone the inevitable—the number of deaths would eventually be about the same in all countries, regardless of measures taken. Sweden would reach herd immunity by May, and the pandemic would be over. As a source, Giesecke referred to his gut feeling.

Besides his appearances in the media, Giesecke repeated the same message to the public health authorities. On March 27, 2020, Giesecke wrote in an email to Preben Aavitsland at the Norwegian Institute of Public Health, “As I have now said many times: you are doing wrong in Norway.”

Giesecke’s self-confident statements did not go down well with the Norwegian public health authorities. On 20 May, Norway’s state epidemiologist Frode Forland told *The Local Norway*:

I said to Johan Giesecke that I think he shouldn't be that super-certain about what he's saying, and that he should show a little bit more, kind of, carefulness in saying all other strategies are wrong apart from the Swedish one. He has been on the front page of the Norwegian newspapers again and again, saying Norway's doing wrong and Sweden is doing right.

However, Giesecke, along with Tegnell and the FHM, remained adamant that Sweden was right, despite having suffered many times more deaths than Norway. In May 2020, they believed that Sweden had reached a substantial level of immunity, even though antibody tests demonstrated the complete opposite. They thought, with disastrous consequences, that the high level of supposed immunity in the population would prevent a second wave in Sweden and continued to market Sweden’s strategy globally.

Norway never caught up with the death toll reached in Sweden. As of May 2022, the deaths per million stood at 556, three and a half times less than Sweden.

India

Between April and June 2020, Tegnell turned his attention to India. In *The Times of India*, one of the country’s most widely read media outlets, Tegnell was directly quoted as stating that the “vaccine is so far off” while most of Europe and indeed the world had gone into some form of lock-down or invoked various restrictions to curb the spread of the virus. Sweden stood out almost alone and authorities there scrambled to interview with international media outlets to justify why the herd immunity strategy was the best way to go.

During the early stages of the pandemic, Tegnell and Giesecke rolled out questionable scientific reports to justify herd immunity and keeping schools open, which directly influenced policy makers in several countries. India’s Swarna Bharat Party (SBP) was quick to support this laissez faire approach when it was clear that there was no scientific evidence to support Tegnell’s claims around herd immunity.

It has to be remembered that at the time Sweden had one of the lowest testing rates among OECD countries. From March 20, 2020, only those that were hospitalized received a COVID-19 test, a policy that continued until late spring. This did not include children, yet Tegnell was professing to his counterparts in India that keeping schools open would not have a detrimental effect on children’s health.

The *Times of India* reported on April 11, 2020, “Sweden isolates its elderly and those with serious pre-conditions. It keeps primary schools open since this virus has virtually no effect on little children, and children are therefore the first to help society acquire herd immunity. Sweden also insists on reasonable social distancing, but people are not required to wear masks, which allows the slow and sustained spread of the virus to less vulnerable groups.”

India—May 2020

In May 2020, at a webinar hosted by the Public Health Foundation of India, Tegnell stated that at least 20 percent of the population of Stockholm had become immune to SARS-CoV-2. He claimed that COVID-19 was mostly a very mild and unnoticeable disease, at a time when the virus had spread unchecked throughout Sweden’s elderly care homes and the country had one of the highest death rates per capita in the world.

Tegnell went on to say that masks cause more problems than benefits and that it was better to remain at home when sick. He stated, “We fairly know for certain that masks do not protect you from getting ill outside of the hospital, because the kind of mask you use will not stop the virus from entering your respiratory tract. It might have some effect on you of infecting other people when you are sick.”

For over two years Tegnell, the FHM, and the government demonized masks despite over 80 meritorious studies on the efficacy of masks, but strangely enough they needed very little evidence to embark on their herd immunity strategy. In July 2020, Sweden’s state minister and minister of health went on record by stating that “the government says no to oral protection, we do not have that culture.” The demonization of masks was invoked from the top echelons of the Swedish government and authorities and was published ad nauseum throughout Swedish media.

India—June 2020

Giesecke was soon interviewed by Mr. Rahul Gandhi, a member of the Indian National Congress, and the interview was published on their website. Giesecke reiterated the point about how mild the virus was, and that severe lock-downs could lead to more deaths than what could be attributed to the virus. The two had the following exchange:

RAHUL GANDHI: You’ve been an infectious disease expert.

How are you seeing this from Sweden and Europe?

JOHAN GIESECKE: This is a disease that is spreading across the globe like a wildfire and almost everyone in the world will be infected. But it is a very mild disease. 99% of the people infected will have very little symptoms or no symptoms at all.

RAHUL GANDHI: The perception of the disease even in India is that it is a very dangerous disease. Why this discrepancy in perception? What has created this discrepancy?

JOHAN GIESECKE: Because people are dying, and quite a lot of people are dying... and it is a quick process. But in the end, you will see that it is a very small proportion of old or all who have symptoms of the disease. Most people will be completely symptomless.

...

JOHAN GIESECKE: I think for India you will ruin your economy very quickly if you had a severe lock-down. I think it's better, skip the lock-down, take care of the old and the frail and let the other people have the infection. Most people will not even be sick. They will not even notice they have it. It's a mild disease.

RAHUL GANDHI: Do you have any questions about India on this front?

JOHAN GIESECKE: How are you talking about this balance between disease and economy?

RAHUL GANDHI: Well, we got a full lock-down and I'm skeptical of a full lock-down myself. I do think that one has to move to a partial lock-down. I think the full lock-down is damaging and the damage increases exponentially. The sooner you get out of the lock-down, the better it is.

JOHAN GIESECKE: You may even create more deaths by a severe lock-down than the disease will do.

With scientific evidence constantly emerging that the virus can cause all types of neurological and internal organ damage, Giesecke has failed at all international interviews to provide concrete evidence to the contrary.

In May 2022, BBC reported that the true number of deaths in India from COVID-19 might never be known. Between January 2020 and December 2021 India reported approximately 480,000 official deaths from COVID-19, but the WHO estimates that the figure is more likely to be 10 times that amount and that India could account for almost one third of global COVID-19 deaths.

Sweden exported its pseudoscience to India based on non-peer reviewed reports, claiming that schools were safe when children were not being tested, and had zero scientific evidence to justify embarking on a herd immunity strategy. Swedish experts' exceptionalism failed to take into account the difference in population densities, social stratification, and development levels when exporting their pseudoscience to other countries.

United Kingdom

In September 2020, Business Insider reported on how British Prime Minister Boris Johnson took advice from Tegnell before deciding to reject tougher COVID-19 restrictions, including a second lock-down. The final restrictions, which included putting a curfew on restaurants and bars, fell far short of the tougher measures that Johnson's own scientific experts had been seeking.

A spokesperson for Johnson commented at the time, "the PM took evidence sessions from a number of scientists via Zoom. The Prime Minister was in the Cabinet room and he [Tegnell] was one of the contributors."

While it is not clear what the content of these discussions were, the British government has been wholly reticent in sharing the transcripts and has denied access to these documents. What we do know is that Tegnell

regularly praised the "British idea of herd immunity," which was emblazoned across Swedish media before the British government stepped back from openly pursuing such a questionable strategy.

Ireland

In September 2020, Giesecke traveled to Ireland to present the herd immunity strategy to the Irish Oireachtas (Parliament) Committee. He was met with consternation and disbelief. Health officials came out with a strong rejection of this policy and dismissed any suggestions that Ireland should invoke a herd immunity strategy to deal with the pandemic. The headlines after Giesecke's unsuccessful visit to Ireland were picked up strongly by the media.

In an interview with the Irish Examiner on October 23, Ireland's Chief Clinical Officer, Dr. Colm Henry, stated in a rebuttal to Giesecke's assumptions, "The strongest defenses in a nursing home cannot withstand a virus that can enter through multiple entrances."

Incredibly, Giesecke failed to mention that Sweden's handling of the pandemic during the first wave condemned thousands of elderly to succumb to the virus, as masks were demonized, care workers were deprived of PPE, and the Swedish health authorities were still in denial about asymptomatic and pre-symptomatic contagion. Many experts have reported that often palliative care for the elderly was given over the phone without a medical expert ever seeing the patient.

Dr. Colm Henry and many other Irish medical experts refused to remotely consider an unproven and unethical herd immunity strategy, which was summed up through Dr. Henry's harsh words in the Irish Examiner:

It can enter through visitors and health care workers. The thought then that we should expect older people to cocoon themselves and promote some kind of apartheid in society where they're left to defend for themselves while the rest of us live asymptomatic or low symptomatic live. I don't think it's acceptable in a civilized society.

Brazil

On April 22 and May 7, 2020, the embassy of Sweden in Brazil and the consulate general of Sweden in São Paulo organized two webinars called "Covid-19: Experience Exchange Brazil-Sweden" with Tegnell and Sweden's ambassador Johanna Brismar-Skoog as speakers. The participants and viewers included Brazilian authorities, academia, organizations, and businesses. The purpose was to "promote an intense exchange between Sweden and Brazil on COVID-19."

In the two webinars, Tegnell presented Sweden's strategy as successful. He asserted that the Swedish health care system had managed well, stating, "Health care services have kept on functioning at a very good level. There have always been empty beds. Nobody has ever been denied treatment in any way. Everybody has received the same level of treatment they would normally do."

This is patently untrue. There are countless reports of people not getting the treatment they needed during spring 2020 in Sweden. Elderly homes were advised not to send anyone to hospitals. Most COVID-19 patients in elderly homes never met a doctor. That is why there were empty hospital beds. A huge field hospital opened in the suburbs of Stockholm but was never used, as elderly people were being given morphine instead of oxygen and thousands were denied health care on the grounds of age or underlying conditions.

Tegnell claimed that the decision to keep schools open had proved to be correct and other countries could learn from Sweden's example, saying, "I think we have shown that schools have a very small effect on the spread of the disease... We have had very few problems with cases in

schools. We had 200 cases amongst those below the age of 20.”

However, in spring 2020, testing was limited to those who were admitted to hospital for COVID-19. Tegnell himself said in a press conference in January 2021 that they were now finding more sick children compared to earlier because “last spring we tested practically no children at all.”

Ambassador Johanna Brismar-Skoog, took a similar line as Tegnell, saying, “Based on the scientific evidence that the Swedish authorities look at, children are not big contributors to the spread. They hardly get it at all themselves, and there seems to be no tangible evidence that they are spreading it on.” Swedish authorities had no scientific evidence since they were not testing at schools, not even if a school staff member died of COVID-19.

Besides school closures, Tegnell spoke against lock-downs in general, again saying that they would only postpone the inevitable and not solve anything. He felt that it was pointless in locking down in order to wait for a vaccine, as vaccines, at least on a big scale, were far too long away—18 months, at least. Tegnell described lock-downs as unsustainable because of all the negative effects on health and economy.

To prove the ineffective nature of lock-downs in contrast to Sweden’s strategy, Tegnell compared New York City with Sweden, saying that New York City’s death toll had been way above Sweden’s even though New York City was under lock-down. He did not mention the different population densities: Sweden with 25 per square kilometer versus New York City with 38.242 per square kilometer.

São Paulo had recently made masks compulsory on public transport and considered implementing a mask mandate in other public spaces as well. When he was asked what the science says about face masks, Tegnell answered, “It is better to stay at home when you are sick. It is quite clear that facial masks will not protect you from getting infected. There is no science saying that. There is one study, as I know of, saying that it might lessen the risk to infect others.”

Tegnell said that masks were risky for the general public to use, as putting them on and taking them off safely was “very difficult.” He argued that people would touch their masks and then transmit the disease via their hands, adding, “Almost all experts in Sweden are very negative about using masks, definitely in society but also in elderly care and so on.”

According to Tegnell, what would help to slow down the spread was herd immunity. In the first webinar on April 22, 2020, Tegnell estimated that 20-30 percent of residents in the Stockholm region were immune to SARS-CoV-2 at the time. In the second webinar on May 7, 2020, his estimate had risen to 25 percent. He said they believed the epidemic was now slowing down partly because “a considerable part of the population is now immune.”

In his opinion, the neighboring countries would struggle since they had so few who had been sick and thus, they were not as near herd immunity as Sweden. He stated, “We can see now that our neighboring countries have about one percent of the population who has been infected so far. We have maybe 20-25 percent. Which means they have a long way to go before they get any help from immunity in controlling the disease, which means that they are going to have a lot of measures in place for a long, long time.”

Tegnell’s estimates about the level of immunity in the Stockholm region proved to be wrong, as an antibody study later showed that only 7.3 percent of Stockholmers had antibodies by late April 2020.

Tegnell claimed there had been no reinfections in Sweden, stating, “Population immunity will be there... During all of this three-month period, Sweden has had about 30,000 cases. Not one single person has had the disease twice. As you know, we have a very good system in Sweden with personal identifiers, so we will definitely catch even a single case of somebody having the disease twice. And we haven’t seen anything like

that in our registers.”

Again, Tegnell left out the critical information that in Sweden, testing was very limited. If you did not end up in hospital, you were not tested. Also, if you already had tested positive before, you were not tested again. A system with personal identifiers does not work finding reinfections if you cannot get tested.

The idea behind the webinars with Brazil was to exchange experiences, but when Sweden’s issues, such as limited testing and treatment, were left out, and the level of immunity and its effects were exaggerated, it had the effect of being a marketing campaign for Sweden’s brutal herd immunity policy.

On May 14, 2020, Brazil’s president Jair Bolsonaro stated to the business community that if it had depended on him, “almost nothing would have been closed, like in Sweden.” During this time, the Bolsonaro regime was enforcing the back-to-work campaign, along with governments globally.

As a result of following Sweden’s example, Brazil has been hit hard by the pandemic. Brazil has officially recorded almost 666,000 COVID-19 deaths, representing a death rate of 8,318 deaths per million population.

According to the UNDP, the cities of Rio de Janeiro, Manaus, and São Paulo have all been hotbeds for the virus. In Rio de Janeiro, 32 percent of excess deaths are unaccounted for while in Manaus, the capital of the vast state of Amazonas, this figure was over 80 percent. These statistics demonstrate that the unofficial death toll may be five times as high as officially reported.

United States

In June 2020, Politico reported how then-US President Donald Trump and his advisors consulted with scientists that were pushing the unethical herd immunity strategy. A meeting was held with the Health and Human Services Secretary, Alex Azar and Scott Atlas, an advisor to Trump. Included at the meeting was a Swedish Harvard medical professor, Martin Kuldorff, who along with Stanford medical professor Jay Bhattacharya and Oxford epidemiologist Sunetra Gupta were the authors of the controversial Great Barrington Declaration (GBD).

Following the herd immunity policy implemented in Sweden, the GBD claimed that anti-COVID lock-downs were detrimental and should be avoided, instead focusing on the dubious theory of “focused protection,” in which they claimed that those most at risk could be kept safe while the rest of society could return to normal.

This had disastrous consequences in Sweden, the UK and other countries. Martin Kuldorff et al. envisioned that herd immunity could be achieved within approximately three months if the virus was allowed to sweep through the population. At the White House meeting, Azar, Trump, and Atlas sought out controversial views to justify Trump’s handling of the pandemic that had killed 210,000 Americans and had infected over 7.5 million.

The vast majority of the international scientific and medical community were of the view that striving for herd immunity as promoted by Kudorff and the GBD could result in millions of deaths from COVID-19 in the US alone.

Kuldorff has taken to social media to promote his propaganda and pseudo-science and was temporarily banned from Twitter and LinkedIn. In a Twitter post on May 15, 2022, Kuldorff stated, “75% of American children have already had covid, providing strong natural immunity against future infection.”

This has been one of the most pervasive messages of Swedish experts, but there is a complete lack of scientific analysis and Swedish experts such as Kuldorff appear oblivious to the fact that natural herd immunity has a very limited time span. Sweden has now one of the highest per capita rates of multisystem inflammatory syndrome in children (MIS-C), which is caused by COVID-19 in children, and there are no recommendations to vaccinate children under the age of 12.

Martin Kulforff's pseudo-scientific theories have contributed greatly to the exacerbation, revisionism, and denialism of the dangers of COVID-19 in the US. Kuldorff callously tweeted that vulnerable elderly people were naively fooled into believing that masks would protect them and attempted to point the finger at some of the elderly who failed to socially distance properly. He was subsequently banned from Twitter as a result, albeit temporarily.

One of the most disturbing aspects of the Swedish approach to the pandemic lies in the fact that protecting the international image of Sweden has come first and foremost. Throughout the spring of 2020, Ann Linde, Minister of Foreign Affairs, gave no less than 70 interviews to the foreign press. She noted that the aim was to improve Sweden's image since it "affects exports and investments... That is why we spend a lot of time and money on the image of Sweden."

A June 2020 article published by media outlet Aftonbladet was headlined, "Documents reveal: This is how Swedish government tries to save the image of Sweden." It noted that as thousands of elderly people were dying in unprotected care homes and thousands more were denied hospital care, Ann Linde was putting pressure on the foreign diplomatic corps to "wash the image of Sweden."

What characterizes the efforts of the Swedish governance system throughout the pandemic debate are their monumental efforts put into preserving the Swedish image using the same phraseology throughout all interviews: "We have the same goals as all other countries," "No one could have seen it coming," "We work with the same challenges and use similar tools as most other countries," and more.

The startling fact though is that from Belarus to Brazil, and Sweden to South Africa, Swedish experts have spent an inordinate amount of time justifying their actions. While numerous epidemiologists across the world were focused on tackling the virus within their own borders, Swedish experts spent more time doing interviews and exporting their reckless herd immunity policy. Counting the costs could take years to materialize, but it will come too late for many.



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